

Epi Update for Friday, June 21, 2019
Center for Acute Disease Epidemiology (CADE)
Iowa Department of Public Health (IDPH)

Items for this week's Epi Update include:

- **FDA warning: fecal microbiota transplants and multi-drug resistant organisms**
- **Update: Ebola outbreak in Democratic Republic of the Congo**
- **Tularemia and babesiosis in Iowa**
- **In the news: Norovirus close-ups might help fight stomach flu**
- **In the news: Vaccine injury claims are few and far between**
- **In the news: Spending time in nature boosts health, study finds**
- **Infographic: Where to check for ticks**

FDA warning: fecal microbiota transplants and multi-drug resistant organisms

FDA has issued a safety alert after one patient died and another suffered an invasive infection after receiving fecal microbiota transplants (FMTs) from the same donor. Both infections were caused by extended-spectrum beta-lactamase (ESBL)-producing *E. coli*. The donor stool was not tested for ESBL-producing gram negative organisms prior to use.

Fecal transplants have been used to manage severe intestinal disorders caused by *C. difficile* that have not responded to standard therapies. The idea is to use stool from a healthy donor to restore the normal balance of bacteria and other organisms in the intestine - the microbiome.

"FDA is informing members of the medical and scientific communities and other interested persons of the potential risk of transmission of multi-drug resistant organisms (MDROs) by FMT and the resultant serious adverse reactions that may occur," FDA stated in the safety alert. In light of the adverse events, FDA recommends that donor screening questions specifically "address risk factors for colonization with MDROs, and exclusion of individuals at higher risk of colonization with MDROs."

To view the full alert, visit

www.fda.gov/vaccines-blood-biologics/safety-availability-biologics/important-safety-alert-regarding-use-fecal-microbiota-transplantation-and-risk-serious-adverse.

Update: Ebola outbreak in Democratic Republic of the Congo

The ongoing Ebola outbreak in northeastern Democratic Republic of the Congo (DRC) began in August 2018. Since then, there have been 2,168 reported cases and 1,431 reported deaths, including 119 deaths among health care workers.

Current prevention measures include contact tracing/monitoring, traveler screening and vaccination. DRC's Ministry of Health, WHO and other partners are offering the investigational vaccine to priority populations, such as frontline responders and contacts of reported cases. There are currently no antiviral drugs licensed to treat Ebola virus disease.

The risk to travelers is considered low. CDC currently categorizes the area as a Travel Alert Level 2, recommending enhanced precautions. Travelers to this area could be infected with Ebola virus if they come into contact with an infected person's blood or other body fluids.

The risk for transcontinental global spread also remains low. CDC recommends that U.S. health care facilities continue to practice an all-hazards approach, asking acutely ill patients about recent travel but not focusing only on this ongoing outbreak.

To view the full travel alert, visit

wwwnc.cdc.gov/travel/notices/alert/ebola-democratic-republic-of-the-congo.

Tularemia and babesiosis in Iowa

While Lyme disease is the most commonly reported tick-borne disease in Iowa, it is not the only tick-borne infection of concern. One tick-related case of tularemia was recently reported in Iowa and a potential case of babesiosis is currently being investigated.

Tularemia is caused by the bacterium *Francisella tularensis*. Transmission to humans can occur via several different routes, including the bite of a tick. Two ticks capable of transmitting tularemia are found in Iowa: the American dog tick and the lone star tick. In 2018, one case of tularemia was reported in Iowa.

Babesiosis is usually caused by the parasite *Babesia microti*, which infects red blood cells. The parasite is spread by the blacklegged tick (or deer tick), the same tick that spreads Lyme disease in Iowa. The last identified case of babesiosis in Iowa was in 2017, when two cases were reported.

For more information on tick-borne diseases in Iowa, visit

<https://idph.iowa.gov/cade/vectorborne-illness#Tick-borne%20diseases>.

In the news: Norovirus close-ups might help fight stomach flu

www.sciencenews.org/article/closeups-norovirus-strains-varying-sizes-help-fight-stomach-flu

In the news: Vaccine injury claims are few and far between

www.nytimes.com/2019/06/18/health/vaccine-injury-claims.html

In the news: Spending time in nature boosts health, study finds

www.cnn.com/travel/article/nature-health-benefits/index.html

Infographic: Where to check for ticks



To view in full size, visit www.cdc.gov/features/rmsf/index.html.

Have a healthy and happy week!

Center for Acute Disease Epidemiology

Iowa Department of Public Health

800-362-2736